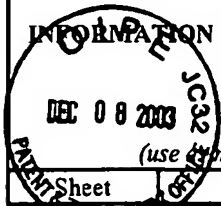
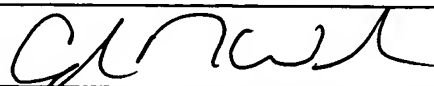


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INFORMATION DISCLOSURE STATEMENT BY APPLICANT  (use as many sheets as necessary)		Application Number	10/600,495
		Filing Date	June 20, 2003
		First Name Inventor	David P. Adams
		Group Art Unit	3721
		Examiner Name	Unknown
		Attorney Docket Number	010398-9060-02
Sheet 1 of 1			

U.S. PATENT DOCUMENTS			
Examiner Initials	U.S. Patent Document Number	Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document
GW	6,557,744	Kitamura	5/6/2003
GW	6,547,230	Sato	4/15/2003
GW	5,931,365	Huang	8/3/1999
GW	5,004,142	Olesen	4/2/1991
GW	4,378,085	McVeigh	3/29/1983

FOREIGN PATENT DOCUMENTS						
Examiner Initials	Country Code	Foreign Patent Document Number	Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document	Translation	English Abstract

Examiner Signature		Date Considered	8/4/04
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